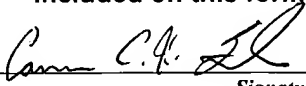



| | | | | | | |
|--|-------------------------------------|-----------------------------------|--|-------------------------------|---------------------------------|--|
| AMENDMENT TRANSMITTAL LETTER (Small Entity) | | | | | Docket No. 99-091 | |
| Applicant(s): VAÑ LUCHENE et al. | | | | | | |
| Application No. 09/586,742 | Filing Date June 5, 2000 | Examiner Yogesh C. Garg | Customer No. 22927 | Group Art Unit 3625 | Confirmation No. 8655 | |
| <div style="float: left; border: 1px solid black; border-radius: 50%; padding: 10px; text-align: center; width: 100px;"> INVENTION OCT 21 2005 UNITED STATES PATENT & TRADEMARK OFFICE </div> <div style="float: right; text-align: right;"> SYSTEMS AND METHODS FOR FACILITATING A TRANSACTION BY MATCHING SELLER INFORMATION AND BUYER INFORMATION </div> | | | | | | |
| <u>COMMISSIONER FOR PATENTS:</u> Transmitted herewith is an amendment in the above-identified application. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 The fee has been calculated and is transmitted as shown below. | | | | | | |
| CLAIMS AS AMENDED | | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE | |
| TOTAL CLAIMS | 32 - | 94 = | 0 | x \$25.00 | \$0.00 | |
| INDEP. CLAIMS | 3 - | 8 = | 0 | x \$100.00 | \$0.00 | |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 | |
| <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 500271 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | |
|  _____ <i>Signature</i> | | | Dated: October 18, 2005 | | | |
| Carson C. K. Fincham Attorney for Applicants PTO Registration No. 54,096 Walker Digital, LLC 203.461.7017/phone 203.461.7300/fax Cfincham@walkerdigital.com | | | I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on October 18, 2005 _____ (Date)  _____ <i>Signature of Person Mailing Correspondence</i> Veronika S. Leliever _____ <i>Typed or Printed Name of Person Mailing Correspondence</i> | | | |
| CC: | | | | | | |

1FW 3625



TRANSMITTAL LETTER
(General - Patent Pending)

Docket No.
99-091

In Re Application Of:

VAN LUCHENE et al.

| Application No. | Filing Date | Examiner | Customer No. | Group Art Unit | Confirmation No. |
|-----------------|--------------|----------------|--------------|----------------|------------------|
| 09/586,742 | June 5, 2000 | Yogesh C. Garg | 22927 | 3625 | 8655 |

Title:

**SYSTEMS AND METHODS FOR FACILITATING A TRANSACTION BY MATCHING SELLER
INFORMATION AND BUYER INFORMATION**

COMMISSIONER FOR PATENTS:

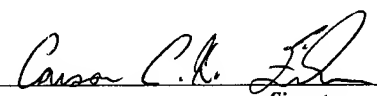
Transmitted herewith is:

- Amendment Transmittal Letter, 1 pg., (x2);
- Amendment & Response to O.A., 15 pp.;
- Supplemental Information Disclosure Statement, 5 pp.;
- PTO Form-1449, 1 pg., and reference cited therein, (1); and
- Return Receipt Postcard.

in the above identified application.

- ☐ No additional fee is required.
- ☐ A check in the amount of _____ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **500271** as described below.
 - ☒ Charge the amount of **420.00**
 - ☒ Credit any overpayment.
 - ☒ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

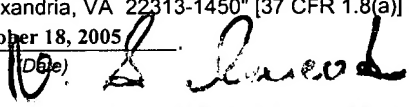
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.


Signature

Dated: **October 18, 2005**

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Cfincham@walkerdigital.com

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| Signature of Person Mailing Correspondence Veronika S. Leliever | |
| Typed or Printed Name of Person Mailing Correspondence | |

CC: